Mailing Label
Label 11-F June 2002

EXPRESS MAIL
UNITED STATES POSTAL SERVICE   Post Office To Addressee

ORIGIN (POSTAL USE ONLY)			DELIVERY (POSTAL USE ONLY)		
PO ZIP Code	Day of Delivery ☐ Next ☐ Second	Flat Rate Envelope ☐	Delivery Attempt Mo. Day	Time ☐ AM ☐ PM	Employee Signature
Date In Mo. Day Year	☐ 12 Noon ☐ 3 PM	Postage $	Delivery Attempt Mo. Day	Time ☐ AM ☐ PM	Employee Signature
Time In ☐ AM ☐ PM	Military ☐ 2nd Day ☐ 3rd Day	Return Receipt Fee	Delivery Date Mo. Day	Time ☐ AM ☐ PM	Employee Signature
Weight ___ lbs. ___ ozs.	Int'l Alpha Country Code	COD Fee	Insurance Fee		
No Delivery ☐ Weekend ☐ Holiday	Acceptance Clerk Initials	Total Postage & Fees $			

☐ WAIVER OF SIGNATURE (Domestic Only) Additional merchandise insurance is void if waiver of signature is requested. I wish delivery to be made without obtaining signature of addressee or addressee's agent (if delivery employee judges that article can be left in secure location) and I authorize that delivery employee's signature constitutes valid proof of delivery.
NO DELIVERY ☐ Weekend ☐ Holiday _____ Customer Signature

CUSTOMER USE ONLY
METHOD OF PAYMENT:
Express Mail Corporate Acct. No.   X090471

Federal Agency Acct. No. or
Postal Service Acct. No.

FROM: (PLEASE PRINT)   PHONE (914) 941 5600

MCGLEW & TUTTLE P.C.
SCARBOROUGH STATION RD
PO BOX 327
SCARBOROUGH   NY 10510-0827

TO: (PLEASE PRINT)   PHONE ( )

COMMISSIONER FOR PATENTS
PO BOX 1450
ALEXANDRIA   VA 22313-1450

PRESS HARD.
You are making 3 copies.   **FOR PICKUP OR TRACKING CALL 1-800-222-1811 www.usps.com**   EMS

FRIDAY

DECEMBER 10, 2004

BEST AVAILABLE COPY